Non-Executive Report of the:

Health and Wellbeing Board

Tuesday 21 September 2021

Denise Radley, Corporate Director Health,

Unrestricted

Report of: Denise Radley, Corporate Director Health, Adults and Community

Adults and Community

Tower Hamlets Black, Asian and Minority Ethnic Inequalities Commission – Health

Lead Member	Councillor Rachel Blake (Cabinet Member for
	Adults Health and Wellbeing)
Originating Officer(s)	Somen Banerjee (Public Health)
	Joanne Starkie (Strategy and Policy)
	Daniel Kerr (Strategy and Policy)
Strategic Plan Priority /	Priority 1: People are aspirational, independent and
Outcome	have equal access to opportunities.
	Outcome 3: People access joined-up services when they need them and feel healthier and more

1 Executive Summary

Recommendations and Action Plan

This report presents the action plan in response to the Tower Hamlets Black, Asian and Minority Ethnic¹ Inequalities Commission health recommendations.

independent.

The Tower Hamlets Black, Asian and Minority Ethnic Inequalities Commission completed its review in March 2021, making recommendations across areas of community leadership, health, education, and employment. Nine of the 23 recommendations made by the Commission relate to health and care services.

The Health and Wellbeing Board are asked to further develop and refine the action plan (Appendix I) and associated deadlines so that our commitments to becoming an anti-racist and improving health outcomes for Black, Asian and Minority Ethnic communities are clear and meaningful.

2 Recommendations:

- 2.1 The Health and Wellbeing Board is recommended to:
 - Note the actions taken by Board partners to date in carrying out the nine health recommendations of the Tower Hamlets Black, Asian and Minority Ethnic Inequalities Commission (Appendix I).

¹ This report and action plan uses the abbreviation "BAME" in line with the Commission report, however it is recognised that this term is subject to debate.

- Develop and refine the future action plan, timescales and action owners (Appendix I) for the Health and Wellbeing Board to lead on and oversee with a view to having a streamlined, clear set of concrete actions that the Board is committed to.
- Agree the additional resources needed to carry out the action plan: it is proposed that in addition to existing staff resources, a 0.2 FTE, six-month staff post be created to lead on this, hosted by a partner organisation at an estimated cost of £2,800 per partner (local authority, Clinical Commissioning Group, Barts Health NHS Trust, East London Foundation NHS Trust, GP Care Group).

3 REASONS FOR THE DECISIONS

- 3.1 The findings of the Commission outline the local changes that need to be made in the health and care system to tackle inequality and improve health outcomes for Black, Asian and Ethnic communities. The action plan is intended to ensure that the findings are acted on in a meaningful way.
- 3.2 Additional staff resource to carry out the action plan is recommended to ensure there is sufficient, dedicated resource to carry out the commitments in the plan.

4 **ALTERNATIVE OPTIONS**

- 4.1 The contents of the action plan (Appendix I) can be amended in line with feedback.
- 4.2 The action plan could be carried out through existing staff resources.

5 <u>DETAILS OF THE REPORT</u>

Background

- 5.1 The Tower Hamlets Black, Asian and Minority Ethnic Inequalities Commission completed its review in March 2021, focusing on four areas:
 - Community leadership
 - Health
 - Education
 - Employment.
- The Commission found that the constraints of structural racism are most apparent when considering health outcomes of our Black, Asian and Minority Ethnic residents which are worse than those of White residents in many areas, with many Black, Asian and Minority Ethnic residents suffering from a higher burden of multimorbidity. A considerable emphasis needs to be placed on improving the partnership approach to tackle the wider determinants of health, with too many Black, Asian and Minority Ethnic residents experiencing poorer employment and housing conditions. Furthermore, access to health services needs to be improved by ensuring services meet the cultural needs of our diverse communities and developing strong and effective relationships with these community. Digital exclusion is a prevalent access barrier, exacerbated by the COVID-19 pandemic, alongside ineffective communication and inadequate translation services. The need to work with our Black, Asian and Minority Ethnic communities should be at forefront of our recovery agenda ensuring we deliver real improvement in health outcomes.

Health recommendations arising from the Commission

5.3 As a result of these findings, nine of the 23 recommendations made by the Commission relate to health. These are:

	Recommendation
1	Digital Exclusion Organisations address digital exclusion facing Black, Asian and Minority Ethnic communities which is having an impact on their ability to access services, employment, engage in community life and achieve their life outcomes.
2	Campaign and Social Determinants Lead a high-profile local campaign for the government to provide adequate funding to address health inequalities including socio- economic factors.
3	Hostile Environment Local NHS organisations to lead a local campaign for the government to review hostile environment policies which seeks to reduce the profile of the checking of immigration status of service users it is statutorily required to undertake.
4	Partnership That partnership structures and strategies are reviewed to deliver radical changes at pace on health inequalities in the borough.
5	Representation Tower Hamlets Partnership to develop initiatives to support more Black, Asian and Minority Ethnic residents to become health professionals (particularly underrepresented and smaller Black, Asian and Minority Ethnic communities).
6	Research The Health & Wellbeing Board, by the end of 2021, undertake detailed external research on causes of health inequalities amongst Black, Asian and Minority Ethnic communities which puts engagement of the community at the forefront of its work to identify issues and solutions.
7	Clinical Training Review and strengthen clinical training in order to increase understanding of different cultural needs and deliver better health services to all communities.
8	Co-designed Services That NHS organisation undertake meaningful engagement and involvement of Black, Asian and Minority Ethnic communities in design, development and delivery of services. Health organisations need to improve the way services are understood and support Black, Asian and Minority Ethnic residents so that they are empowered and confident to access them. This may mean they need to change the way that services are configured to make them more culturally appropriate.
9	Communication NHS organisations review their communication and engagement strategy which ensures guidance and important message is culturally appropriate and available in different languages and uses different approaches to ensure message is reach to different audiences.

- 5.4 Since the Commission published its recommendations in spring 2021, work has been carried out to develop plan, articulating the actions Health and Wellbeing Board and the Tower Hamlets Together partnership commit to carrying out in the short, medium and longer-term. These are presented in Appendix I. This action plan is presented to the Health and Wellbeing Board for discussion, refinement and further development².
- 5.5 Responding to the Covid-19 pandemic has of course been a key focus for the health and care system over the last year, and much of the work done to date to tackle inequalities facing Black, Asian and Minority Ethnic communities has been done through this lens (for example, work to tackle disparities in Covid-19 vaccination take-up levels). The work carried out to date is summarised in Appendix I.

Oversight and monitoring the action plan

- The Health and Wellbeing Board will hold oversight of the action plan and will be responsible for the actions assigned to it. The Tower Hamlets Together partnership and Board will be responsible for the actions delegated to it by the Health and Wellbeing Board and will be accountable to the Board for delivery.
- 5.7 The progress of the action plan covering all 23 recommendations on community leadership, health, education and employment will be monitored by the Tower Hamlets Race Equality Network on a quarterly basis. The Network will lead on a thematic review, undertake further investigations into specific issues, and consider progress made against individual Pledges. The Race Equality Network will hold an annual event to publicly check and mark progress, and it will release an annual report which details achievements, challenges, and further findings.

Resources to carry out the action plan

- 5.8 Existing staff resources from all partner organisations will be needed to carry out the action plan.
- In addition, it is recommended that an additional 0.2 FTE, six-month staff post be created to lead on this, hosted by a partner organisation at an estimated cost of £2,800 per partner (local authority, Clinical Commissioning Group, Barts Health NHS Trust, East London Foundation NHS Trust, GP Care Group). The role of the post-holder will be to coordinate key, cross-cutting activity including:
 - Gathering equalities data across the system, collating, analysing and acting on this
 - Coordinating an audit of key public information in community languages and organising subsequent translations
 - Coordinating 'you said, we did' work related to co-production
 - Coordinating a 'lessons learned' exercise in relation to Covid-19 approaches targeted at Black, Asian and Minority Ethnic communities that we may want to replicate in future for other health issues.

6 EQUALITIES IMPLICATIONS

6.1 The focus of the Black, Asian and Minority Ethnic inequalities Commission was to explore inequalities facing our Black, Asian and Minority Ethnic communities. The findings, recommendations and actions which respond to them reflect this. The Commission noted the importance of intersectionality of inequalities facing different protected characteristics

² It should be noted that Appendix I will be presented to Cabinet in October 2022.

such as Black, Asian and Minority Ethnic women, different groups within Black, Asian and Minority Ethnic communities and deprivation. The actions provide a partnership response to the recommendations from this Commission will help to address inequalities in Tower Hamlets and provide a platform to ensure equalities remains at the forefront of our collective work

7 OTHER STATUTORY IMPLICATIONS

- 7.1 The main interfaces here relate to:
 - 2010 Equality Act
 - 2014 Care Act
 - 2021 Health and Care Bill

8 COMMENTS OF THE CHIEF FINANCE OFFICER

- 8.1 In addition to existing staffing resources within the partnership, this report requests an additional resource to work on the action plan. The estimated cost for each of the five partnership organisations is £2,800 to fund a 0.2 FTE, six-month post.
- There is further work required to cost up the short-term and longer-term funding requirements to carry out the proposed activities in the action plan (including health actions). The funding requirement calculation for each proposed activity would need to consider the use of existing resources (including internal staffing resource) within the partnership and potential funding sources. Funding would need to be secured through the relevant organisations' governance processes before a project could be initiated, and this would need to include permanent budget source to be agreed for any projects which would create funding requirements in future years (in addition to one-off funding).

9 COMMENTS OF LEGAL SERVICES

- 9.1 The Council has the legal power to undertake the activities referred to in this report.
- 9.2 The refined action plan refers to activities which may require the expenditure of various sums of money to achieve certain objectives. Where the identified sums are to be spent with external organisations then such expenditure will be subject to either an appropriate level of competition in line with the law or as grants in accordance with the Council's constitution (as the case may be). In either case, such expenditure will be subject to appropriate checks and measures (such as comparison with similar spend elsewhere and contract monitoring) to ensure the expenditure represents statutory Best Value.
- 9.3 The expenditure via grant or services contract will also be subject to its own approval process in accordance with the Council's constitution.

Linked Reports, Appendices and Background Documents

Appendices

 Appendix 1 – Tower Hamlets Black, Asian and Minority Ethnic Inequalities Commission - Health Recommendations and Action Plan – To follow.

Background Documents – Local Authorities (Executive Arrangements)(Access to Information)(England) Regulations 2012

NONE

Officer contact details for documents:

Or state N/A